



Commissioner for Patents
Washington, DC 20231
www.uspto.gov

new 05



Bib Data Sheet

CONFIRMATION NO. 7317

SERIAL NUMBER 09/756,471	FILING DATE 01/08/2001 RULE	CLASS 379	GROUP ART UNIT 2645	ATTORNEY DOCKET NO. 800431
APPLICANTS Alasdhair Campbell, Austin, TX; Stephen A. Michael, Colorado Spring, CO;				
** CONTINUING DATA ***** This appln claims benefit of 60/174,961 01/07/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/29/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY TX	SHEETS DRAWING 17	TOTAL CLAIMS 37
INDEPENDENT CLAIMS 4				
ADDRESS 27964				
TITLE Customer communication service system				
FILING FEE RECEIVED 613	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7317

SERIAL NUMBER 09/756,471	FILING DATE 01/08/2001 RULE	CLASS 713	GROUP ART UNIT 2131	ATTORNEY DOCKET NO. 800431
APPLICANTS Alasdhair Campbell, Austin, TX; Stephen A. Michael, Colorado Spring, CO;				
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/174,961 01/07/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/29/2001				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		STATE OR COUNTRY TX	SHEETS DRAWING 17	TOTAL CLAIMS 37
INDEPENDENT CLAIMS 4				
ADDRESS 23372				
TITLE Customer communication service system				
FILING FEE RECEIVED 613	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	